#### Form No. SH-13 Nomination Form

[Pursuant to Section 72 of the Companies Act, 2013 and Rule 19(1) of The Companies (Share Capital and Debentures) Rules, 2014]

| Unit : Ta<br>C-101, 1<br>Lal Baha | ta Inve<br>st Floo<br>adur S | r Consultants Private<br>estment Corporation<br>or, 247 Park,<br>hastri Marg,<br>Mumbai 400083 |                            |                               |                                 |                           |  |  |  |
|-----------------------------------|------------------------------|--|----------------------------|-------------------------------|---------------------------------|---------------------------|--|--|--|
| I/We                              |                              |  | the holder(s) of t         | he securities, particulars o  | of which are given hereunder,   | wish to make nomination   |  |  |  |
| and do                            | hereby                       | y nominate the follo   | wing persons in whom       | shall vest, all the rights in | respect of such securities in t | he event of my/our death. |  |  |  |
| (1)                               | PART                         | ICULARS OF SECURI  | ITIES (in respect of which | ch nomination is being m      | ade) :                          |                           |  |  |  |
|                                   | Na                           | ture of securities   | Folio No.                  | No. of securities             | Certificate No.                 | Distinctive No.           |  |  |  |
|                                   |                              |  |                            |                               |                                 |                           |  |  |  |
| (2)                               | PAR1                         | TICULARS OF NOMIN  | NEE/S -                    |                               |                                 |                           |  |  |  |
| ( )                               | (a)                          | Name :   |                            |                               |                                 |                           |  |  |  |
|                                   | (b)                          | Date of Birth:   |                            |                               |                                 |                           |  |  |  |
|                                   | (c)                          | Father's / Mother's  | : / Spouse's name :        |                               |                                 |                           |  |  |  |
|                                   | (d)                          | Occupation:  |                            |                               |                                 |                           |  |  |  |
|                                   | (e)                          | Nationality:   |                            |                               |                                 |                           |  |  |  |
|                                   | (f)                          | Address :  |                            |                               |                                 |                           |  |  |  |
|                                   | (g)                          | E-mail Id. & Teleph  | one No :                   |                               |                                 |                           |  |  |  |
|                                   | (h)                          | Relationship with  | the security holder(s):    |                               |                                 |                           |  |  |  |
| (3)                               | IN C                         | CASE NOMINEE IS A MINOR –  |                            |                               |                                 |                           |  |  |  |
| (-)                               | (a)                          | Date of birth:   |                            |                               |                                 |                           |  |  |  |
|                                   | (b)                          | Date of attaining n  | majority :                 |                               |                                 |                           |  |  |  |
|                                   | (c)                          | Name of guardian   |                            |                               |                                 |                           |  |  |  |
|                                   | (d)                          | Address of guardia   | an:                        |                               |                                 |                           |  |  |  |
| (4)                               | PAR <sup>-</sup>             | TICLII ARS OF NOMIN  | NEE IN CASE MINOR NO       | MINEE DIES REFORE ATTA        | AINING AGE OF MAJORITY          |                           |  |  |  |
| ( . /                             | (a)                          | Name :   |                            |                               |                                 |                           |  |  |  |
|                                   | (b)                          | Date of Birth :  |                            |                               |                                 |                           |  |  |  |
|                                   | (c)                          | Father's / Mother's  | : / Spouse's name :        |                               |                                 |                           |  |  |  |
|                                   | (d)                          | Occupation:  | •                          |                               |                                 |                           |  |  |  |
|                                   | (e)                          | Nationality:   |                            |                               |                                 |                           |  |  |  |
|                                   | (f)                          | Address :  |                            |                               |                                 |                           |  |  |  |
|                                   | (g)                          | E-mail Id. & Teleph  | one No :                   |                               |                                 |                           |  |  |  |
|                                   | (h)                          | Relationship with  | the security holder(s):    |                               |                                 |                           |  |  |  |
|                                   | (i)                          | Relationship with  | the minor nominee :        |                               |                                 |                           |  |  |  |
| Name(s                            | ) and <i>i</i>               | Address of Security h  | holder(s)                  |                               | Signature(s)                    |                           |  |  |  |

Name and Address of Witness

Signature

# Form No. SH-14 Cancellation or Variation of Nomination

[Pursuant to sub-section (3) of Section 72 of the Companies Act, 2013 and Rule 19(9) of The Companies (Share Capital and Debentures) Rules, 2014]

| Unit :<br>C-101<br>Lal Ba | Tata Invest<br>, 1st Floor,<br>hadur Sha          |   |   |                              |                             |                            |
|---------------------------|---|---|---|------------------------------|-----------------------------|----------------------------|
|                           |   | cel the nominated securities.   | ion(s) made by me/us in f   | avour of(                    | (name(s) and address of the | nominee) in respect of the |
|                           |   |   |   | Or                           |                             |                            |
|                           | ities in who                                      | om shall vest all   | rights in respect of such s   | securities in the event of m | •                           | of the below mentioned     |
| (1)                       |   |   | Î   | nomination is being cance    | 1                           |                            |
|                           | Nature o  | f securities  | Folio No.   | No. of securities            | Certificate No.             | Distinctive No.            |
| (2)                       | i. ii. iii. iv. v. vi. viii. (b) IN ( i. iii. iv. | Name: Date of Birth: Father's / Moth Occupation: Nationality: Address: E-mail Id. & Tel Relationship w CASE NEW NOM Date of birth: Date of attaini Name of guare Address of guare | vith the security holder: INEE IS A MINOR – Ing majority: dian: ardian: | NEE DIES BEFORE ATTAININ     |                             |                            |
| (3)                       |   | Name: Date of Birth: Father's / Moth Occupation: Nationality: Address: E-mail id. & Tel Relationship w  | ner's / Spouse's name :   |                              | NO AGE OF WINSOILLE         |                            |
| Name                      | e(s) and Ad                                       | dress of Securit  | y holder(s)   |                              | Signature(s)                |                            |
| Name                      | e and Addr  | ess of Witness  |   |                              | Signature                   |                            |

To, TSR Darashaw Consultants Private Ltd. Unit: Tata Investment Corporation Limited C-101, 1st Floor, 247 Park, Lal Bahadur Shastri Marg, Vikhroli West, Mumbai 400083

Place:

Date:

#### **Updation of Shareholder Information**

I/ We request you to record the following information against our Folio No:

| General Information :  |   |  |  |  |  |
|--|---|--|--|--|--|
| Folio No :   |   |  |  |  |  |
| Name of the first named Shareholder :                          |   |  |  |  |  |
| PAN:*  |   |  |  |  |  |
| CIN/ Registration No :* (applicable to Corporate Shareholders) |   |  |  |  |  |
| Tel No. with STD Code :  |   |  |  |  |  |
| Mobile No :  |   |  |  |  |  |
| E-mail ld :  |   |  |  |  |  |
| *Self attested copy of the document(s) enclose                 |   |  |  |  |  |
| Bank Details:  |   |  |  |  |  |
| IFSC:<br>(11 digit)  | MICR:<br>(9 digit)  |  |  |  |  |
| Bank A/c Type :  | Bank A/c No :*  |  |  |  |  |
| Name of the Bank :   |   |  |  |  |  |
| Bank Branch Address :  |   |  |  |  |  |
|  |   |  |  |  |  |
| * A blank cancelled cheque is enclosed to enal                 | verification of bank details  |  |  |  |  |
| incorrect information, I/ We would not hold tl                 | pove are correct and complete. If the transaction is delayed because of incomplete or Company/ RTA responsible. I/ We undertake to inform any subsequent changes in the blace. I/ We understand that the above details shall be maintained by you till I/We hold o. |  |  |  |  |

Signature of Sole/ First holder

## Form ISR - 1

(SEBI circular No. SEBI/HO/MIRSD/MIRSD\_RTAMB/P/CIR/2021/655 dated November 03,2021)

#### REQUEST FOR REGISTERING PAN, KYC DETAILS OR CHANGES / UPDATION THEREOF

[For Securities (Shares / Debentures / Bonds, etc.) of listed companies held in physical form]

| A. I / We, request you t             | to Register                            | / Change / Update the following  | (Tick ✓relevant box)                     | Date : / /  |
|--------------------------------------|--|--|--|---|
| □ PAN                                |  | ☐ Signature  | ☐ Mobile Number                          | er  |
| □ Bank details                       |  | ☐ Registered Address   | □ E-mail addres                          | S   |
| •                                    | •                                      | pe filled in by the First Holder ]   | - n .                                    |   |
| Name of the Issuer Co                |  |  | Folio N                                  |   |
| Face value of Securiti               |  | Fire   | Number of Secu                           |   |
| Distinctive number of                | T                                      | From   | · ·                                      | o   |
| Securities (Optional) E-mail Address |  |  |  |   |
| Mobile Number                        |  |  |  |   |
| Serial No                            |  | 1  | } << Kindly write the S                  | erial no as printed in KYC Form                                     |
| Jeriai NO                            |  | 1  | y << killuly write the 5                 | eriai no as printeu in KTC Form                                     |
| C. I/We are submitting               | document:                              | s as per Table below (tick√as re   | levant, refer to the instructions):      |   |
| Name(s) of the Securi                | ity holder(s                           | s) in Capital as per PAN   | PAN                                      | PAN Linked to   |
| Copies of PAN of all the Holder(s)   | duly self-atteste                      | d with date to be enclosed with this Form.   |  | Aadhar -Y/N   |
|                                      |  |  |  | Tick any one [✓] *  |
| 1.                                   |  |  |  | Yes / No  |
| 2.                                   |  |  |  | Yes / No  |
| 3.                                   |  |  |  | Yes / No  |
| 4.                                   |  |  |  | Yes / No  |
| Note: * PAN shall be valid on        | alv if it is linked                    | to Aadhar by March 31, 2022, or any oth  | per date as may be execified by CRDT     |   |
| 140te. I AN Shall be valid on        | ily ii it is iii ikeu                  | Bank Account Details   |  | •   |
| Name of the Bank                     |  |  |  |   |
| & Branch                             |  |  | IFSC                                     |   |
| Bank A/c No.                         |  | Tick any one [✓]- Acct type ☐ Savings ☐Current☐ NRO ☐ NRE ☐ Any other [ ]                  |  |   |
|                                      | •                                      | ring the name of the first holder is ma for registering the Bank Account details.          | ndatory, failing which first security ho | older shall submit copy of bank                                     |
| Demat Account Numb                   | emat Account Number 16 digit DP/CL [ ] |  |  |   |
| Also provide Client Mas              | ter List (CMI                          | L) of your Demat Account, provid   | ed by the Depository Participan          | t.  |
| space is required) in which          | I / we are the                         | RTA) to update the above PAN and K'<br>holder(s).<br>Iments enclosed are true and correct. |  | (use Separate Annexure if extra strike off what is not applicable ] |
| First Holder                         | r                                      | Joint Holder - 1   | Joint Holder - 2                         | Joint Holder - 3  |
| Signature                            |  |  |  |   |
| Name                                 |  |  |  |   |
| Address                              |  |  |  |   |
|                                      |  |  |  |   |

Note: If the address mentioned above differs from the address registered with the Company, you are requested to record the new address by submitting the documents as specified in point (3) overleaf.

I/We are submitting documents as per Table below (tick√as relevant, refer to the instructions):

| No. | <b>√</b> | Document/Information/Details         | Instruction/Remark  |  |  |
|-----|----------|--------------------------------------|---|--|--|
| 1   |          | PAN of (all) the (joint) holder(s)   | PAN copies of all the holder(s) duly self-attested with date to be enclosed. PAN shall be valid only if it is linked to Aadhar by March 31, 2022, or any date as may be specified by the CBDT. For Exemptions / Clarifications on PAN, please refer to Objection Memo as specified in SEBI circular.  |  |  |
| 2   |          | Demat Account Number                 | Provide Client Master List (CML) of your Demat Account, provided by the Depository Participant.   |  |  |
| 3   |          | Proof of Address of the first Holder | Provide self attested copy of any ONE of the documents, issued by a Govt. Authority, only if there is change in the address;  Client Master List (CML) of your Demat Account, provided by the Depository Participant.  Valid Passport/ Registered Lease or Sale Agreement of Residence/ Driving License/Flat Maintenance Bill*  Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill - Not more than 3 months old.  Identity card (with Photo) / document with address, issued by Central/State Government and its Departments, Statutory / Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions.  For FII / sub account, Power of Attorney given by FII / subaccount to the Custodians (which are duly notarized and / or apostilled or consularised) that gives the registered address should be taken.  The proof of address in the name of the spouse*  * Kindly provide additional self-attested copy of Identity Proof of the holder/claimant. |  |  |
| 4   |          | Bank details                         | Provide the latest copy of the bank statement with details of bank name, branch, account number and IFSC or Original cancelled cheque leaf bearing the name of first holder. Alternatively, Bank details available in the CML as enclosed will be updated in the folio.   |  |  |
| 5   |          | E-mail address                       | As mentioned on Form ISR-1, alternatively the E-mail address available in the CML as enclosed will be updated in the folio.   |  |  |
| 6   |          | Mobile                               | As mentioned on Form ISR-1, alternatively the mobile number available in the CML as enclosed will be updated in the folio.  |  |  |
| 7   |          | Specimen Signature                   | Provide banker's attestation of the signature of the holder(s) as per Form ISR – 2 and Original cancelled cheque leaf bearing the name of the first holder.   |  |  |
|     |          |                                      | Submit Form(s) as per any ONE of the following options.   |  |  |
|     |          |                                      | ☐ SH-13 For First Time Nomination   |  |  |
| 8   |          | Nomination                           | ☐ SH-14 For Change in Existing Nomination   |  |  |
|     |          |                                      | ☐ <u>SH-14 and ISR-3</u> For Cancellation of existing Nomination and to "Opt-Out"   |  |  |
|     |          |                                      | ☐ ISR-3 To "OPT-Out" of Nomination or if No-Nomination is required  |  |  |

Note: All the above forms are also available on the website of the RTA.

## Form ISR - 2

SEBI circular No. SEBI/HO/MIRSD/MIRSD\_RTAMB/P/CIR/2021/655 dated November 03, 2021 on Common and Simplified Norms for processing investor's service request by RTAs and norms for furnishing PAN, KYC details and Nomination)

#### Confirmation of Signature of Securities Holder by the Banker

Serial No:\_ as mentioned in KYC Form Bank Name and Branch 2. Bank contact details **Postal Address** Mobile/Tel number E-mail address 3. Bank Account number Account opening date 5. Account holder's PAN Account Holder's Name i) i) ii) ii) iii) iii) iv) iv) 6. Latest photograph of the account holder(s) iii)- Holder Photo iv)- Holder Photo ii)- Holder Photo i)- Holder Photo 7. Account holder(s) details as per Bank Records a) Address b) Mobile/Tel number c) Email address d) Signature(s) of the Holder(s) Bank Manager's Signature and Bank Seal -- (To be Mandatorily Filled by the Bank Official) --Place: Name of the Bank Manager: Date: Employee Code: Mobile / Tel no: Email\_id:

## Form ISR - 3

# Declaration Form for Opting-out of Nomination by Holders of Physical Securities in Listed Companies

|   | (SEBI circular No   | o. SEBI/HO/MIRSD/MIRSD_RTA  | AMB/P/CIR/2021/65                           | 5 dated November 03  | , 2021} Date: / /  |  |
|---|---|---|---|--|--|--|
| Name of the Company Address of the Company  | :<br>/:   |   |   |  | Serial No:(As mentioned in KYC Form)   |  |
| PARTICULARS OF THE SE   | ECURITIES (in res   | pect of which nomination  | on is being opted                           | i out)   |  |  |
| Nature of Securities  | Folio No.   | No. of Securities *   | Certificate I                               | No.  | Distinctive No(s)<br>( From – To )   |  |
| Tick ✓ as relevant  |   |   |   |  | (110111-107  |  |
| Equity / Debentures   |   |   |   |  |  |  |
| person(s) in whom s  I/ We understand th my / our death, my / details, including, W | hall vest, all the<br>ne issues involo<br>our legal heir<br>ill or document<br>bate of Will or<br>oresaid securit | ved in non-appointners) / representative(<br>its issued by the Courany other documents. | f such securitinent of nomings) are require | es in the even<br>ee(s) and furth<br>d to furnish the<br>or Succession | t of my /our death.  There are aware that in case of the requisite documents / Certificate or Letter of the competent authority, for |  |
| First Holder  |   | Joint Holder -1   | J   | oint Holder -2   | Joint Holder -3  |  |
| Signature   |   |   |   |  |  |  |
| Name  |   |   |   |  |  |  |
| Witness Details:  |   |   |   |  |  |  |
| Name of Witness   |   |   |   |  |  |  |
| Address of  |   |   |   | Signatu  | re   |  |
| Address of – Witness –  |   |   | Din   |  |  |  |
| -   |   |   | Pin:  | Date   |  |  |

<sup>\*</sup> Use of ISR-3 (ie to Opt-Out of Nomination OR if "No\_Nomination" is required by the investor ) will be applied for the entire securities against the said Folio.

# Form ISR-4

(see circular No. SEBI/HO/MIRSD/MIRSD\_RTAMB/P/CIR/2022/8 dated January 25, 2022 on Issuance of Securities in dematerialized form in case of Investor Service Requests)

## **Request for issue of Duplicate Certificate and other Service Requests**

(for Securities - Shares / Debentures / Bonds, etc., held in physical form)

|  | Date://  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|
| A. Mandatory Documents / details required   We are submitting the following documents   Depository Participant to dematerialize my / of issuance of Letter of Confirmation, receivable relevant, refer to the instructions): | ents / details and undertake to request the our securities within 120 days from the date   |  |  |  |  |  |  |  |
| Demat Account No. (If available):  |  |  |  |  |  |  |  |  |
| Provide Client Master List ( <b>CML</b> ) of y<br>Participant*   | our Demat Account from the Depository  |  |  |  |  |  |  |  |
| circular dated November 03, 2021 in this re  | Provide the following details, if they are not already available with the RTA (see <u>SEBI</u> <u>circular dated November 03, 2021</u> in this regard) |  |  |  |  |  |  |  |
| PAN  | Specimen Signature   |  |  |  |  |  |  |  |
| Nomination / Declaration to Opt-out  |  |  |  |  |  |  |  |  |
| <b>B.</b> I / We request you for the following (tick   | ✓ relevant box)  ☐ Claim from Unclaimed Suspense   |  |  |  |  |  |  |  |
|  | Account  |  |  |  |  |  |  |  |
| Replacement / Renewal / Exchange of securities certificate   | ☐ Endorsement  |  |  |  |  |  |  |  |
| Sub-division / Splitting of securities certificate   | Consolidation of Folios  |  |  |  |  |  |  |  |
| Consolidation of Securities certificate 2  | Transmission   |  |  |  |  |  |  |  |
| Transposition (Mention the new order of  | holders here)  |  |  |  |  |  |  |  |
| C. I / We are enclosing certificate(s) as deta   | ailed below**:   |  |  |  |  |  |  |  |
| Name of the Issuer Company   |  |  |  |  |  |  |  |  |
| Folio Number   |  |  |  |  |  |  |  |  |

| Nam          | e(s) of the security                                 | 1.            |  |  |  |
|--------------|--|---------------|--|--|--|
| hold         | er(s) as per the                                     | 2.            |  |  |  |
| certi        | ficate(s)  | 3.            |  |  |  |
| Certi        | ficate numbers                                       |               |  |  |  |
| Disti        | nctive numbers                                       |               |  |  |  |
| Num          | ber & Face value of                                  |               |  |  |  |
| secu         | rities   |               |  |  |  |
| ** Wh        | nerever applicable / whichev                         | ver details   | are available  |  |  |
| D.           | Document / details require                           | d for speci   | fic service request:                                   |  |  |
| l.           | ☐ Duplicate securities ce                            | -             |  |  |  |
|              | ·  |               |  |  |  |
| II.          | $\square$ Claim from Unclaimed                       | Suspense A    | Account  |  |  |
|              |  |               |  |  |  |
|              | Securities claimed                                   |               | (in numbers)<br>(in words)                             |  |  |
|              |  |               |  |  |  |
| III.         | ☐ Replacement / Renewa                               | al / Exchang  | ge of securities certificate                           |  |  |
|              | (that is defaced, mutilized)                         | ated, torn,   | decrepit, worn out or where the page on the            |  |  |
| IV.          | ☐ Endorsement  |               |  |  |  |
| V.           | ☐ Sub-division / Splitting of securities certificate |               |  |  |  |
| VI.          | ☐ Consolidation of securities certificate/Folios     |               |  |  |  |
| VII.         | ☐ Transmission                                       |               |  |  |  |
| VIII.        | ☐ Transposition                                      |               |  |  |  |
| Prov<br>abov |  | ities certifi | cate(s) <u>for request for item numbers III to VII</u> |  |  |
| Decla        | ration: All the above facts s                        | stated are    | true and correct to best of my / our knowledge         |  |  |

|                              | Security Holder 2 | Security Holder 3 |
|------------------------------|-------------------|-------------------|
| Security Holder 1 / Claimant |                   |                   |
| <b>√</b>                     | <b>V</b>          | <b>√</b>          |
| J                            |                   |                   |
|                              |                   |                   |

| PIN |  |  |
|-----|--|--|
|-----|--|--|

After processing the service request, the RTA shall issue a 'Letter of Confirmation' to the securities holder/claimant, which is valid only for 120 days. Using this 'Letter of Confirmation', the securities holder/claimant shall request the DP to dematerialize the securities, failing which the securities shall be credited to the Suspense Escrow Demat Account of the Company.